



MONUMENT PLACEMENT ORDER

_____ Highland Cemetery
_____ Jamesburg Park Cemetery
\$50.00 per monument

CITY LICENSE
(316) 268-4553

DATE _____

Number of Monuments to be placed _____

Name of Deceased: _____ Date of Death: _____

Location of Lot: Section _____ Lot _____ Space _____

Name of Lot Owner (If known) _____

Person Ordering Memorial _____

Address _____

Relationship to Deceased _____

Name of Monument Company _____

Address _____

To be Set by (Date) _____

FOR OFFICIAL USE ONLY

License Number	Date Issued
Total Fee	Issued By